AMP	AIGN CONTRIBUTIONS AND EXPENSES	REPORT	0		State of Nevada
10	ICES FOR TRUCKE	EM	eado	2WS	
ime (pr	P.O. BOX 2327	applicable) R (ON0	NV 8950	District (if epplicable)
	ddress (include bity and zip code)		· · · · · · · · · · · · · · · · · · ·	Telephone No.	75 323-67
Mail Ad	······································	lbie Gee			
aeri wh		BAG POL		ND EXP NONPRO	
	AMENOED FANNLIAL F	FILING PETI OR I	TIONERS WE EXPEND FUN	O INITIATE/CIRCULATE DS IN EXCESS OF 10K	PETITION & RECEIVE
	Annual Filling - Due January 15, 2006 Period: January 1, 2005 - December 31, 2005				
	Report #1 Due August 8, 2005* Period: Jen. 1, 2006 Aug 3, 2006			FI	LE
	Report #2 Due October 31, 2006* Period: Aug. 4, 2006 Oct. 26, 2006			JAN 0	9 2006
	Report #8 IDue — January 15, 2007*/** Period: Oct. 27, 2006 — Dec. 31, 2006			DEAN SECRETAL	HELLER RY OF STATE
ב	Annual Filling - Due January 15, 2007 Period: January 1, 2006 - December 31, 2006	3			OFFICE USE ONLY
* <u>T</u> F	rese Reports are filed by incumbents/candida	rtes running (or office in	the 2006 election (cycle
~ Tì	nird Report suffices for 2007 Annual Filling if o	candidate als	o filed Rep	ort Nos. 1 and 2	Cumplative
	CONTRIBUTIONS SUMMARY			This Period	From Beginning of Report Pariod #1 through End of This Reporting Period
1. 1	Total Monetary Contributions Received in Excess of \$100 (See page 1 of instruction sheet)				1000,00
	Total Monetary Contributions Received of \$100 or Less (See page 2 of Instruction wheet)			pa	595,00
	Total Monatary Contributions in the form of loans guarants party. (See page 2 of Instruction sheet)	ed by a third			
4.	Total Monetary Contributions in the form of loans that were (See page 2 of instruction wheet)	forgiven	c		
	Ţ	Thin Period	Comulative Fro Beginning of Report Period & Through End of This Reporting	1	
5.	Total Amount of Monetary Contributions		Period		1
	Received (Add Lines 1 through 4) (See page 2 of Instruction sheet)				15 95,00
	Total Amount of Written Commitments for Contributions (When commitment is hyndrid, report as contribution (reposition) or in kind))				
	See purge 2 of Instituction shout) Total Value of in Kind Contributions Received in				
	Excess of \$100 (944 page 2 of instruction wheet)				
	EXPE	ENSES SUMN	ARY		
8.	Total Monetary Expenses Paid in Excess of \$100				1010 40
q 1	(See page 2 of irretraction sheet) Fotal Monetary Expenses Paid of \$100 or Less				1119.70
	(See page 2 of Instruction sheet)				76.00
10.	Total Amount of All Monetary Expenses Paid				1100
	Add Lines 8 and 9) (See page 2 of Instruction sheet)	i			1/195.40
11,	Total Value of in Kind Expenses in Excess of \$100 (See page 3 of Instruction sheet)				
	Disposition of Unspent Contributions				
day	ly reported on Report #3 , Annual Report or 15 th of the second month after condidates defeat or imbert dose not run for restriction)				
	page 3 of Instruction sheet)	399.			
1 Dec	A Slare Under Panalty of Parjury That the Foregot 7	FFIRMATION oing is True		L	
X	Ou I Dray			1/8/06	
aturo	The state of the s		/	Date	
1,dec	Ravised: Sep-05			PAGEOF_	9_

CAMPAIGN CONTRIBUTIONS		Report Period	#
VOICES FOR TRUCKER	meadows		
Nems (print) Office (if ap		District (if ap	p(icable)

Contributions in Excess of \$100 or, When Added Together from One Contributor Exceeds \$100 Transfer Total Amount of All Campaign Contributions to Line 1 of Contributions Summery

CONTRIBUTOR'S NAME AND ADDRESS	DATE OF EACH CONTRIBUTION	AMOUNT OF EACH CONTRIBUTION	CHECK HERE IF LOAN	NAME AND ADDRESS OF 3 ^{TO} PARTY IF LOAN GUARANTEED BY 3 ^{TO} PARTY	NAME AND ADDRESS OF PERSON WHO PORGAVE THE LOAN, IF DIFFERENT THAN CONTRIBUTOR
The Committee TO RE-EICCT TON: HARSH	8123105	1000.00			·
890 marsh Auc Re 000, NV 19509					
			-		

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WRITTEN COM	MITMENTS		Report Period	#
VOTCES	For TRUCKEE	meadows	·	
Name (print)	Office	(If applicable)	District (if ap	plicable)

Written Commitments in Excess of \$100 or, When Added Together from One Entity Exceeds \$100 Transfer Total Amount of All Written Commitments to Line 6 of Contributions Summary

NAME AND ADDRESS OF PERSON WHO MADE THE COMMITMENT	DATE OF EACH COMMITMENT	AMOUNT OF EACH COMMITMENT
1		
	,	

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CAMPAIGN EXPENSES		Report Period	#
Name (print)	Office (if applicable)	District (if ap	plicable)

Expense Catagories

CATEGORIES	CODE
Office expenses	(A)
Expenses related to volunteers	В
Expenses related to travel	С
Expenses related to advertising	D
Expenses related to paid staff	Ę
Expenses related to consultants	F
Expenses related to polling	G
Expenses related to special events	н
** Goods and services provided in kind for which money would otherwise have been paid	ı
Other miscellaneous expenses	<u>•</u>

** NRS 294A.362 requires "In Kind" contributions and expenses to be reported on a separate form, which is attached.

^^	MAI	DA	ICN.	EXPE	Nei	ĘQ.
UA.	L PUT I		GN	ヒスアヒ	NOI	23

Report	Period	:

NOTOPE	FOR	TRUCKER	Meadows		
				Digital ((applicable)
Name (print)		Omos (n	applicable)	District (i	i abbucanai

Expenses in Excess of \$100 Transfer Total Amount of All Campaign Expenses to Line 8 of Expenses Summary

NAME AND ADDRESS OF PERSON, GROUP OR ORGANIZATION WHO RECEIVED THE PAYMENT FOR THE EXPENSE(8)	CATEGORY (See Previous Page) NRS 294A.365	DATE OF EACH EXPENSE	AMOUNT OF EACH EXPENSE
TON; Harsh 890 MARSH AVE Repo, NV 89505	Repay loan	7/28/05	1000,00
Toni Harsh Ave 270 Marsh Ave 2800, NV 89505	A WEBSITC RENEWAL	8124105	119.40
		,	

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IN KIND CONTRIBUTIONS AND EXPENSES REPORT

IN KIND CONTRIBUTION IS DEFINED AS THE VALUE OF SERVICES PROVIDED IN KIND FOR WHICH MONEY WOULD HAVE OTHERWISE BEEN PAID.

In kind contributions and expenses include: paid polling and resulting data, paid direct mall, paid solicitation by telephone, any paid paraphernalia that was printed or otherwise produced to promote a campaign and the use of paid personnel to assist in a campaign. An in kind contribution may also include, but is not limited to: goods and services such as billboards, office space, printing, food and beverage and yard signs.

The donor of in kind contributions shall furnish to the recipient (candidate or other person), a written statement setting forth the actual cost of those services or the fair market value within 30 days after the time he furnishes those services. (NAC 294A.043)

Examples of In kind contributions: (1) A person contributes billboard space and does not charge the candidate. The candidate would report the fair market value or actual cost of the billboard space as an in kind contribution; (2) A person pays for the printing cost of political signs for a candidate. The candidate would report the actual cost or fair market value of printing the signs as an in kind contribution.

Example of in kind expenses: (1) A person contributes the use of a large room to a candidate as an in kind contribution. Once the candidate utilizes the room it becomes an in kind expense to be reported.

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IN KIND CAMPAIGN CONTRIBUTIONS		Report Period	*
Name (print)	Office (If applicable)	District (if epp	ilcable)

IN KIND

Contributions in Excess of \$100 or, When Added Together from One Contributor Exceeds \$100 Transfer Total Value of All in-Kind Campaign Contributions to Line 7 of Contributions Summary

CONTRIBUTOR'S NAME AND ADDRESS	DATE OF EACH IN KIND CONTRI- BUTION	DESCRIPTION OF EACH IN KIND CONTRIBUTION	VALUE OR COST OF EACH IN KIND CONTRIBUTION/ COMMITMENT	CHECK HERE IF LOAN	NAME AND ADDRESS OF 3 ^{NO} PARTY IF LOAN GUARANTEED BY 3 ^{NO} PARTY	NAME AND ADDRESS OF PERSON WHO FORGAVE THE LOAN
						and the second second second
					and the second second	
	,					

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IN KIND WRITTEN COMMITMENTS		Report Period	#
Name (print)	Office (if applicable)	District (if ap	plicable)

In Kind Written Commitments in Excess of \$100 or, When Added Together from One Entity Exceeds \$100 Transfer Total Amount of All Written Commitments to Line 6 of Contributions Summary

NAME AND ADDRESS OF PERSON WHO MADE THE IN KIND COMMITMENT	DATE OF EACH IN KIND COMMITMENT	Amount of Each In Kind COMMITMENT	
.,			

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IN KIND CAMPAIGN EXPENSES		Report Period	#
Name (print)	Office (If applicable)	District (if ap	pficable)

IN KIND

Expenses in Excess of \$100 Transfer Total Value of All In-Kind Campaign Expenses to Line 11 of Expenses Summary

NAME AND ADDRESS OF PERSON, GROUP OR ORGANIZATION WHO RECEIVED THE IN KIND GOOD(S) OR SERVICE(S)	DESCRIPTION OF EACH IN KIND EXPENSE	DATE OF EACH IN KIND EXPENSE	VALUE OR COST OF EACH IN KIND EXPENSE

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Prescribed by Secretary of State NRS 294A 120, 294A 125, 294A 140, 294A 150, 294A 160 294A 200, 294A 210, 294A 220, 294A 282